

**IN THE CLAIMS**

Please amend claims 1 and 5 as follows:

1. (Currently Amended) A method of identifying a candidate psychiatric patient for treatment with atypical antipsychotic or antidepressant medication that acts at a D2 dopamine receptor (DRD2) or influences D2 dopamine receptor density, the method comprising:

determining whether the patient's DRD2 genotype is Taq1A allele positive (A1+) or Taq1A allele negative (A1-); wherein:

the determining comprises genotyping a specimen obtained from the patient;

an A1+ genotype is indicative of a candidate for treatment with low dose low DRD2 binding atypical antipsychotics and/or SSRIs; and

an A1- genotype is indicative of a candidate for treatment with high dose or high binding DRD2 binding antipsychotics or alternative antidepressant; and

treating the patient having an A1+ genotype with low dose low DRD2 binding atypical antipsychotics and/or SSRIs, and treating the patient having an A1- genotype with high dose or high DRD2 binding antipsychotics or alternative antidepressant.

2. (Original) The method of claim 1, wherein the psychiatric patient suffers from schizophrenia.
3. (Withdrawn) The method of claim 1, wherein the patient suffers from post-traumatic stress disorder (PTSD), depression, social anxiety or mixed anxiety and depressive states.
4. (Withdrawn) The method of claim 1, wherein the patient suffers from Parkinson's disease.
5. (Currently Amended) The method of claim 1, wherein the high DRD2 binding antipsychotic is risperidone.
6. (Previously Presented) The method of claim 1, wherein the SSRI is paroxetine.
7. (Previously Presented) The method of claim 1, wherein the genotyping comprises use of polymerase chain reaction (PCR).
8. (Previously Presented) The method of claim 1, wherein the specimen comprises blood.